

## Habib Bank AG Zurich WEINBERGSTR. 59 P.O. BOX 225 8042 ZURICH (SWITZERLAND)

## **Network Bank SWIFT RMA Due Diligence Questionnaire**

Name of financial institution				
Cou	Country of incorporation			
Nar	Jame & location of branch/subsidiary exchanging RMA			
1.	In which jurisdictions does your financial institution operate?			
2.	Please provide a brief description of the shareholding structure of your institution. Please also identify, if any, the PEP shareholders.			
3.	In terms of a breakdown by percentages, how do you characterize your customer base? % Corporate Banking % Wealth Management % Retail Banking % Wholesale Banking			
4.	% Other, please specify:  Does your financial institution screen its customer names against US (including OFAC), UN and EU sanction lists?			
5.	Does your financial institution maintain any correspondent banking relationships with any other financial institution located in Myanmar, North Korea, Cuba, Syria, Sudan or Iran? If yes, can you please identify the respective financial institutions?			
6.	Does your financial institution verify the identity of beneficial owners? If yes, up to what percentage?			
7.	Does your financial institution open or maintain anonymous accounts?			

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8. Is your compliance function subject to an independent audit? If yes, can you please confirm the frequency of you audits as well as your most recent audit date			
9.	. Can you please provide the name and contact information of y	our MLRO or equivalent.	
10.	O. Has your financial institution ever been subject to regulatory f can you provide a brief explanation of the circumstance.	ines for AML violations or sanctions breaches? If yes,	
The	he duly completed questionnaire may be returned to us via email (	or completed via the SWIFT RMA system.	
Name		Date	
Title	tle S	ignature	

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